**CERTIFICATE OF MAILING**

I hereby certify that this correspondence is being deposited with the U.S. Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, PO Box 1450, Alexandria, VA, 22313-1450 on 21 November 2005

Jeannie Camara

(Typed or Printed Name of Person Mailing Paper or Fee)

Jeannie Camara

(Signature of Person Mailing Paper or Fee)

2134

**PATENT APPLICATION**  
**Attorney Docket No. OR99-17501**

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

IN RE PATENT APPLICATION OF

Vipin Samar

Serial No. 09/544,709

Filing Date: 6 April 2000

Title: FACILITATING SINGLE SIGN ON BY  
AUTENTICATED CODE TO ACCESS A  
PASSWORD STORE

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) Examiner: Heneghan, Matthew E.  
)  
Group Art Unit: 2134

**AMENDMENT TRANSMITTAL LETTER**

Mail Stop: Non-Fee Amendment  
Assistant Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

In connection with the above-referenced U. S. patent application, transmitted herewith are the following papers:

- Response under 37 C.F.R. § 1.111 to official action mailed 2 September 2005.
- A petition for extension of time is also enclosed with a fee of \$ .00 for a one-month extension for a small entity.
- Petition for Revival of an Application for Patent Abandoned Unintentionally Under 37 CFR 1.137(b), including
  - check for \$ \_\_\_\_\_ petition fee under 37 C.F.R. 1.17(m)
- Information disclosure statement, form 1449 and \_\_\_\_\_ references.
- No additional claims fees are required.

[ ] An additional fee is required, and is calculated as shown below:

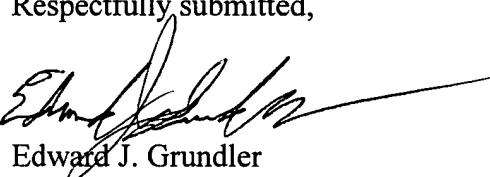
<b>AMENDED CLAIMS</b>					
	NO. OF CLAIMS	HIGHEST NO. OF CLAIMS PREVIOUSLY PAID FOR	EXTRA CLAIMS	RATE	ADDTL FEE
Total Claims		MINUS = 20	0	x \$18 =	
Independent Claims		MINUS = 3	0	x \$78 =	
If Amendment adds multiple dependent claims, add \$260.00					
Total Amendment Fee					
If small entity status is claimed, subtract 50% of Total Amendment Fee					
<b>TOTAL ADDITIONAL FEE DUE FOR THIS AMENDMENT</b>					<b>\$0.00</b>

[ ] A check in the amount of \$\_\_\_\_ is enclosed.  
[ ] Charge \$\_\_\_\_ to Deposit Account No. \_\_\_\_ (Docket No. \_\_\_\_).  
[x] Please deduct any underpayments, credit any overpayments, and charge all required extension of time fees to Deposit Account Number 50-1003. (Docket No. OR99-17501).

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Respectfully submitted,

By



Edward J. Grundler  
Registration No. 47,615

Date: 21 November 2005



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Jeannie Camara

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Jeannie Camara

(Signature of Person Mailing Paper or Fee)

Application Number : 09/544,709 Confirmation Number: 9115

Applicant : Vipin Samar

Filed : April 6, 2000

TC/A.U. : 2134

Examiner : Heneghan, Matthew E.

Docket Number : OR99-17501

Customer No. : 51,067

M/S: Box Non-Fee Amendment

Commissioner for Patents

P.O. Box 1450

Alexandria VA 22313-1450

## AMENDMENT

Sir

In response to the office action of **2 September 2005**, please amend the above-identified application as follows:

**Amendments to the Claims** are reflected in the listing of claims which begins on page 2 of this paper.

**Remarks/Arguments** begin on page 15 of this paper.